

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Nikiforos Kollias, Kenneth Merola, Jeffrey S. Pote,
Gregory Peyonk

Serial No.: 10/007,296

Art Unit: 2851

Filed : November 8, 2001

Examiner:

: METHOD OF TAKING POLARIZED IMAGES OF THE SKIN AND THE USE
THEREOF

I hereby certify that this correspondence is being deposited with the
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(Date of Deposit)

Bernard F. Plantz

(Name of applicant, assignee, or Registered Representative)

(Signature)

May 15, 2002

(Date of Signature)

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Washington, D.C. 20231

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a
Combined Declaration and Power of Attorney for the application of
Kollias et al. entitled METHOD OF TAKING POLARIZED IMAGES OF THE SKIN
AND THE USE THEREOF attorney Docket No. J&J-2067, to complete,
pursuant to Rule 51, this application filed on November 8, 2001 by
Express Mail pursuant to Rule 10. Additionally, submitted herewith
are drawings that comply with 37 CFR 1.84. As required, a copy of the
Notice to File Missing Parts of Application is also attached.

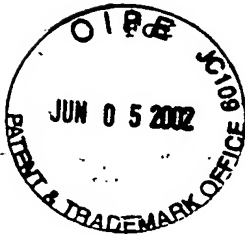
Please charge Johnson & Johnson Deposit Account No. 10-0750/J&J-
2067/WEM in the amounts of \$130.00 for submission of the Declaration
pursuant to Section 1.16(e). The Commissioner is hereby authorized
to charge any additional fees which may be required, or credit any
overpayment to Account No. 10-0750/J&J-2067/WEM. This sheet is
submitted in triplicate.

Respectfully submitted,



Bernard F. Plantz
Reg. No. 32,091
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-2771



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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	J&J-2067
	First Named Inventor	Nikiforos Kollias
	COMPLETE IF KNOWN	
	Application Number	10/007,296
	Filing Date	November 8, 2001
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF TAKING POLARIZED IMAGES OF THE SKIN AND THE USE THEREOF
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **11/08/2001** as United States Application Number or PCT International Application Number **10/007,296** and was amended on (MM/DD/YYYY)

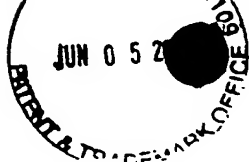
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
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Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:		
Application Serial No.	Filing Date	Status
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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Nikiforos

Family Name

or Surname Kollias

Inventor's
Signature

Date

Residence: City Skillman

State NJ

Country USA

Citizenship USA

Mailing Address 406 Sunset Road

City

Skillman

State NJ

ZIP 08558

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Kenneth

Family Name

or Surname Merola

Inventor's
Signature

Date

Residence: City Agoura Hills

State CA

Country USA

Citizenship USA

Mailing Address 6334 Aquarius Avenue

City

Agoura Hills

State Ca

ZIP 91301

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Jeffrey S.

Family Name

or Surname Pote

Inventor's
Signature

Date

5/13/02

Residence: City Easton

State PA

Country USA

Citizenship USA

Mailing Address 140 Kressman Road

City

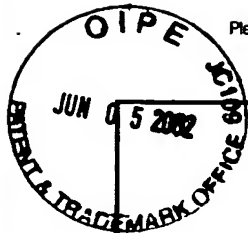
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AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number J&J-2067

First Named Inventor Nikiforos Kollias

COMPLETE IF KNOWN

Application Number 10/007,296

Filing Date November 8, 2001

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Examiner Name

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the specification of which

☐ is attached hereto**OR**☒ was filed on (MM/DD/YYYY) **11/08/2001** as United States Application Number or PCT International Application Number **10/007,296** and was amended on (MM/DD/YYYY)

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
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Application Serial No.	Filing Date	Status
		Patented Patented Patented

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Gregory

Family Name

or Surname

Payonk

Inventor's
Signature*Gregory A Payonk*

Date

5-10-2002

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Country USA

Citizenship USA

Mailing Address 41 Kevin Drive

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Flanders

State NJ

ZIP 07836

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

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